**Probation – Outcome Form**

NCG is committed to safeguarding and promoting the welfare of children, young people and vulnerable adults. We expect all staff to share this commitment.

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| **Colleague Name** |  | |
| **Job Title** |  | |
| **College / Service** |  | |
| **Department** |  | |
| **Position Start Date** |  | |
| **Probation End Date** |  | |
| **The above colleague is coming to the end of their probationary period and you are required to hold a review meeting with them. This meeting should take place before the end of the probationary period.**  **Please ensure you have read the probation policy. Where probations may require to be extended or may be unsuccessful, please speak to your P&D representative to follow a formal process, before completing this form.**  **Upon completion of the review meeting please complete this form confirming the probation outcome and return it to your People and Development Assistant in People Services, no later than 7 days prior to the probation end date.**  **We will then process the change and update iTrent accordingly.** | | |
| **Please confirm the below information:**   |  |  |  | | --- | --- | --- | | **Area** | **Acceptable** | **Not Acceptable** | | Overall Performance & Behaviours |  |  | | Attendance & Punctuality |  |  | | Induction & Mandatory Training |  |  |   **Employment Checks**  **All pre-employment checks and mandatory training will be checked on submission of this form. Where anything remains outstanding, you will be contacted directly by your People and Development Assistant. Please note this may lead to a delay in the Probationary Period being signed off or lead to an unsuccessful probation outcome.** | | |
| **Confirm Appointment** | |  |
| **Extend Probation Period** *(in line with the formal probation process and a maximum of 3 months from the probation end date )* | |  |
| **Terminate Employment** *(in line with the formal probation process and in accordance with leaver process)* | |  |
| **Declaration:**  **By signing this form you are confirming you have met with the colleague to discuss their probationary period and the outcome stipulated above. Completed forms must be returned to your People and Development Assistant no later than 7 days prior to the probation end date.**  **Signed:**  **(Line Manager)**  **Print Name:**  **(Line Manager)**  **Date:** | | |